

David Goodman:

Good morning, my name is David Goodman and I am an engineer and a physician and I am very delighted to be here today. I've spent the last twenty years as a serial entrepreneur of a variety of health care ventures ranging from drug delivery to medical devices to health care services and it's very interesting to be here as a boomer and a soon to be member of AARP. As an engineer, I was trained to use data to make decisions and to be systematic in my approach in looking at the world and to be analytical and to have a methodology that would incorporate total quality management. As a physician I was taught to be autonomous, to practice based on my last case, to refuse really to hold to a standard to prescribe to process. What I found ironic and actually very frustrating is that the practice of medicine doesn't really work that well and I think would work better if it was systematic in some ways like engineering. The analogy I always used to draw when I was in the disease management business was the airline business, maybe not the business model, but the process that the airlines used to keep airplanes in the air and on the ground the right way and that's basically systematizing everything. Airline pilots that refuse to do that don't fly airplanes. The irony in medicine is that physicians who refuse to use guidelines are compensated and rewarded as well as physicians who don't. I think that doesn't work and I think it will become impossible as the boomers reach the age of, not only being zoomers, but chronically ill zoomers, and I think they will overwhelm our health care system unless we radically change the way we, as physicians do business.

What I'd like to focus on in my five or so minute time period are the two fundamental aspects to the health care infrastructure that are fundamental to the rational delivery of health care. The first is an electronic medical record. I think it's ironic that we have the highest tech in health care and the lowest tech in health care and that the bulk of information in health care is still on paper. I know that the President has been advocating the use of an electronic medical record. I believe we need to obviously need to take his lead and push it even further in providing rewards and disincentives for physicians who use medical records and those who incorporate electronic medical records and those that don't. I think it's absolutely essential that health care information go from paper to silicon as soon as possible.

The second fundamental barrier and opportunity relates to the flow of information between participants and the health care equation. I think that HIPAA needs to be revisited in order to provide the privacy protections that we demand and require but enable the free-flow of information between the various participants in the health care equation. By implementing these two fundamental pieces of infrastructure I believe that what we can do is to unleash a new era of innovation in health care delivery which will directly impact the lifestyle and health care of the boomer population.